BEST AVAILABLE COPY

									Number		iting Date						
CLAIMS ONLY								Application Number Filing Date // /////////////////////////////////									
					- 1	Applicant(s)										
							1	-									
CLAIMS AS FILED AFTER FIRST AFTER SECOND									May be used for additional claims or amendments								
CLAIMS	CLAIMS AS FILED AFTER FIRST AFTER SECOND							1	•			•					
	la de a	Depend	AMENDMENT Indep Depend		AMENDMENT Indep Depend				Indep	De	pend	Indep	Depend	Indep	Depend		
1	Indep	Depend	шоер	7	111000	000000		51							ļ		
2		1						52		Н			 				
3			II	/				53 54	ļ	Н			 				
4			 	 				55		Н							
6	 	 	1	 				56						 	ļ. ——		
7								57		-			 				
8	I		14-	├- /				58 59		╁	-		-	 			
9	 		 	 				60									
11	1	1						61					ļ	 			
12		1						62		├-	\vdash		 				
13			 	 	 			64		\vdash	1						
14		1	\vdash	 				65									
16	 	3						66		Ь_	↓		 	<u> </u>			
17								67		-	\vdash		 				
18	├ ──	!	-	 				69									
20		2.	 	 				70									
21	1	-20-						71		_			 				
22				II				72 73		-	\vdash						
23		-; -	 	V	ļ			74									
25	 			X				75		\square			ļ	<u> </u>			
26		33		7				76 77		-							
27		3	<i> </i>	 \ 	ļ			78		-							
28	 		 	1				79									
30								80		 _							
31				-				81 82		-							
32 33	 		/					83									
34			-'					84									
35								85		-							
36				 				86 87		-							
37 38	 		 					88									
39	 							89		_				 -			
40				1	ļ <u>:</u>			90 91		_			 				
41				 				92									
42								93									
44								94		-							
45				 				95 96		-							
46 47	 		 	 		 		97									
48								98									
49								99		-			 				
50			<u> </u>	 - - - - - - - - - 				100 Total		-			 		T		
Total Indep	#		1					Indep	2]	 _			
Total	1./		-	لــــا	~	∵		Total	42*			•		~			
Depend .	nd 9/							Depend Total	111	_							